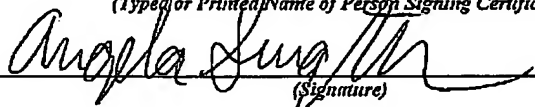
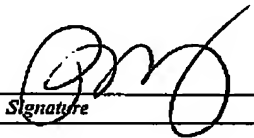
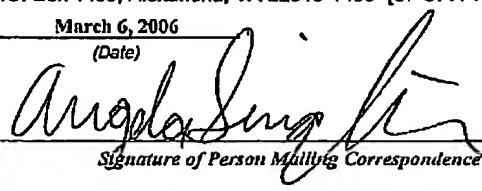


CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8) Applicant(s): Kasai et al.			Docket No. KOY-0034
Application No. 10/803,813	Filing Date March 17, 2004	Examiner Carol Koslow	Group Art Unit 1755
Invention: Photostimulable Phosphor And Method For Producing Photostimulable Phosphor			
RECEIVED CENTRAL FAX CENTER MAR 06 2006			
<p>I hereby certify that this <u>RCE Transmittal (1 pg); Amendment Transmittal (1 pg); Amendment (8 pgs)</u> (Identify type of correspondence)</p> <p>is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>571-273-8300</u>)</p> <p>on <u>March 6, 2006</u> (Date)</p> <p style="text-align: center;"><u>Angela Singleton</u> (Type or Printed Name of Person Signing Certificate)  (Signature)</p> <p style="text-align: center;">Note: Each paper must have its own certificate of mailing.</p>			

P18/REV02

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. KOY-0034	
Applicant(s): Kasai et al					
Application No. 10/803,813	Filing Date March 17, 2004	Examiner Koslow, Carol M.	Customer No. 23413	Group Art Unit 1755	Confirmation No. 7008
Invention: PHOTOSTIMULABLE PHOSPHOR AND METHOD FOR PRODUCING PHOTOSTIMULABLE PHOSPHOR					
COMMISSIONER FOR PATENTS:				RECEIVED CENTRAL FAX CENTER MAR 06 2006	
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	7 -	20 =	0	x \$50.00	\$0.00
INDEP. CLAIMS	3 -	3 =	0	x \$200.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 06-1130 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
 Signature			Dated: March 6, 2006		
Peter R. Hagerty Reg. No. 42,618 Customer No. 23413 Telephone: 404-607-9991			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on March 6, 2006 (Date)  Signature of Person Mailing Correspondence Via Facsimile by Angela Singleton Typed or Printed Name of Person Mailing Correspondence		
CC:					

P11LARGE/REV09